

Changing lives through the arts

EDUCATIONAL THEATRE COMPANY
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Photo and Video Release Form

I hereby give my permission, as the parent/legal guardian of the participating student named below, to the Educational Theatre Company (ETC) for the use reproductions of the video footage, photographs, or voice recordings of this participating student. I understand that the use of the participant's image and voice will be primarily used for the purposes of education and/or promotion by this organization, including posting said photographs and/or motion picture video film of the event on the ETC Web site, www.educationaltheatrecompany.org, for grant purposes. Furthermore, I hereby consent that such photographs, film, video recordings, and all other visual mediums, may be used free and clear of any claim whatsoever on my part.

Name of Participant:	
Age of Participant:	
Participant's School:	
Signature of Parent/Guardian:	
Date:	
Printed Name of Parent/Guardian:	
Address:	
City:	State:
Zip Code:	
Phone:	